Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 1 of 68

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Elizabeth | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Martin-Hoskins | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | | |
| | | Last name | Last name |
| | | First name | First name |
| | | i ii st ii di ile | Histilane |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 2407 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 2 of 68

| De | ebtor 1 Elizabeth First Name | Martin-Hoskins Middle Name Last Name | Case number (if known) |
|----|--|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 9145 S. Lowe Number Street | Number Street |
| | | Chicago Illinois 60620 | |
| | | City State Zip Code Cook | City State Zip Code |
| | | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| _ | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 3 of 68

| Debtor 1 Elizabeth | Martin- | | Case number <i>(if kno</i> | wn) |
|---|--|--|--|--|
| First Name | Middle Name Last Nan | ne | | |
| Part 2: Tell the Court A | bout Your Bankruptcy Case | | | |
| The chapter of the Bankruptcy Code yo are choosing to file under | Check one. (For a brief description of ea Bankruptcy (Form B2010)). Also, go to the Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | |
| 8. How you will pay the fee | more details about how you may pleashier's check, or money order may pay with a credit card or check I need to pay the fee in installment individuals to Pay Your Filing Fee I request that my fee be waived judge may, but is not required to, the official poverty line that applies | pay. Typically, if you fly your attorney is ok with a pre-printer ents. If you choose e in Installments (O (You may request waive your fee, and es to your family size fill out the Application. | ou are paying the submitting your ed address. this option, sig fficial Form 103 this option only d may do so onl ze and you are u | |
| 9. Have you filed for bankruptcy within th last 8 years? | Pistrict District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | No. Go to line 12. ✓ Yes. Has your landlord obtained an ✓ No. Go to line 12. ✓ Yes. Fill out <i>Initial Statementh</i> Wes. Fill out <i>Initial Statementh</i> | nt About an Eviction | | you want to stay in your residence? St You (Form 101A) and file it with |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 4 of 68

Martin-Hoskins Debtor 1 Elizabeth __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 5 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Mair Document Page 6 of 68

Martin-Hoskins Debtor 1 Elizabeth Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Elizabeth Martin-Hoskins Signature of Debtor 1 Signature of Debtor 2 Executed on _ 12/7/2017 Executed on MM / DD / YYYY MM / DD / YYYY

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 7 of 68

| Debtor 1 Elizabeth | | Martin-Hoskins | Case number (ii | fknown) | |
|--|---------------------------|---------------------------|--------------------------|--|----|
| First Name | Middle Name | Last Name | | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12, d | or 13 of title 11, Unite | nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the | |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § 34 | 2(b) and, in a case in | which § 707(b)(4)(D) applies, certify that | tΙ |
| represented by an | have no knowledge afte | r an inquiry that the inf | ormation in the sched | dules filed with the petition is incorrect. | |
| attorney, you do not | · · | ' ' | | • | |
| need to file this page. | /s/ Morsheda Hash | em | Date | 12/7/2017 | |
| | Signature of Attorney | **** | | MM / DD / YYYY | |
| | | | | | |
| | | | | | |
| | Morsheda Hashem | | | | |
| | Printed name | | | | |
| | | | | | |
| | Semrad Law Firm | | | | |
| | Firm name | | | | |
| | 11101 S. Western Ave | enue | | | |
| | Street | | | | |
| | | | | | |
| | | | | | |
| | Chicago | | Illinois | 60643 | |
| | City | | State | Zip Code | |
| | 0 | 0.4000 | | | |
| | Contact phone | 3122374973 | Email address | mhashem@semradlaw.com | |
| | | | | | |
| | | | | | |
| | Bar number | | State | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 8 of 68

| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|----------------|----------------------|--|--|--|--|
| Debtor 1 | Elizabeth | Martin-Hoskins | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| Case number (If known) | | | (State) | | | | |

| П | Check if this is an |
|---|---------------------|
| | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 \$32,610.00 \$32,610.00 Your liabilities Amount you owe \$10,808.00 \$0.00 |
|--|---|
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$32,610.00 \$32,610.00 Your liabilities Amount you owe \$10,808.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$32,610.00 Your liabilities Amount you owe \$10,808.00 |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Your liabilities Amount you owe \$10,808.00 |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Amount you owe \$10,808.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | Amount you owe \$10,808.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | <u> </u> |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | <u> </u> |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | |
| | |
| | \$12,336.45 |
| Your total liabilities | \$23,144.45 |
| rt 3: Summarize Your Income and Expenses | |
| Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | \$5,096.93 |
| Schedule J: Your Expenses (Official Form 106J) | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 9 of 68

Martin-Hoskins Debtor 1 Elizabeth __ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$8,441.45 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 10 of 68

| Fill in this | inforr | nation to identify your ca | ase: | | | | | |
|--|-------------------------|--|--|-----------------------|---|---------------------|---|--|
| | | | | | Martin Haakina | | | |
| Debtor 1 | | Elizabeth First Name | Middle N | lame | Martin-Hoskins Last Name | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if fi | ling) | First Name | Middle N | lame | Last Name | | | |
| United Sta | ates B | ankruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | nber | | | | | | | |
| Officia | JE | orm 1064/D | | | | | | Check if this is an |
| | | orm 106A/B | | | | | | amended filing |
| Sche | dul | e A/B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where le for name | you think it fits best. B supplying correct inform and case number (if k | se as complete a mation. If more s nown). Answer e | nd ac pace very | • | ople are this fo | e filing together, both a orm. On the top of any a | re equally |
| Part 1: | Desc | ribe Each Residenc | e, Building, Lai | nd, c | r Other Real Estate You Own or I | Have a | ın Interest In | |
| | | | uitable interest | in an | y residence, building, land, or similar | propert | y? | |
| ~ | | Go to Part 2 | | | | | | |
| | Yes. | Where is the property? | | | | | | |
| 1.1 | | | | Wh | at is the property? Check all that apply. | | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.1 | Stree | t address, if available, or o | other description | Н | Single-family home Duplex or multi-unit building | | | ims Secured by Property. |
| | | | | Н | Condominium or cooperative | | Current value of the | Current value of the |
| | | | | Ħ | Manufactured or mobile home | | entire property? | portion you own? |
| | Num | ber Street | | | Land | | B | e a company and the |
| | Nulli | bei Street | | | Investment property | | Describe the nature of interest (such as fee s | |
| | City | State | Zip Code | Ш | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | Wh | o has an interest in the property? Che | eck | Check if this is co | mmunity property |
| | | | | one | | | | |
| | | | | Н | Debtor 1 only Debtor 2 only | | | |
| | | | | Н | Debtor 1 and Debtor 2 only | | | |
| | | | | H | At least one of the debtors and another | | | |
| | | | | Oth | er information you wish to add about | this ite | m, such as local | |
| | | | | pro | perty identification number: | | | |
| If you | own | or have more than one, lis | st here: | Wh | at is the property? Check all that apply. | | Do not deduct secured | claims or exemptions. Put |
| 1.2 | | | | | Single-family home | | the amount of any secu | red claims on Schedule D: |
| | Stree | t address, if available, or o | other description | П | Duplex or multi-unit building | | | ims Secured by Property. |
| | | | | | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobile home | | | |
| | Num | ber Street | | Ш | Land Investment property | | Describe the nature o | f your ownership |
| | | | | Н | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | H | Other | | | - Cotatoj, ii kilowiii |
| | | | | Wh one | o has an interest in the property? Che | eck | Check if this is co | mmunity property |
| | | | | | Debtor 1 only | | ш | |
| | | | | П | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and another | | | |
| | | | | | er information you wish to add about perty identification number: | this ite | m, such as local | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 11 of 68

| Debtor 1 | Elizabeth First Name | Middle Name | Martin-Hoskins Last Name | _ Case number | (if known) | |
|-------------|--|--|---|-----------------|--|---|
| | et address, if available, or ot | w | Vhat is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | oply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nur City | nber Street State | Zip Code | Investment property Timeshare Other | - | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | [] [] [] | Vho has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote Other information you wish to add ab | her | Check if this is co (see instructions) Such as local | mmunity property |
| | the dollar value of the po ve attached for Part 1. Wi | rtion you own for a rite that number he | | ing any entries | s for pages | |
| Do you ov | | equitable interest | in any vehicles, whether they are re | - | - | |
| • | ans, trucks, tractors, sport ut | | also report it on Schedule G: Executory cycles | Contracts and | Unexpired Leases. | |
| 3.1 | Model: Year: | Nissan Altima 2011 99000 | Who has an interest in the prope one. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2011 Nissan Altima | 99000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community pr | | Current value of the entire property? \$4350.00 | Current value of the portion you own? \$2175.00 |
| 3.2 | Make Model: Year: | | who has an interest in the prope one. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | | Current value of the entire property? | Current value of the portion you own? |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 12 of 68

| otor 1 | Elizabeth | | Martin-Hoskins | Case number | el (II Kriowri) | | |
|--|--|------------------------|--|---|--|--|--|
| | First Name | Middle Name | Last Name | | | | |
| 3.3 | Make Model: Year: | | Who has an interest in the prone. Debtor 1 only | r operty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on <i>Schedule</i> | |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the | |
| | Other information: | | Debtor 1 and Debtor 2 only | 1 | entire property? | portion you own? | |
| | | | At least one of the debtors | and another | | | |
| | | | Check if this is communi instructions) | ty property (see | | | |
| 3.4 | Make | <u> </u> | Who has an interest in the p | roperty? Check | Do not deduct secured | claims or exemptions. F | |
| | Model: | | one. | | the amount of any secu | | |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | aims Securea by Propert | |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the | |
| | Other information: | | Debtor 1 and Debtor 2 only | / | entire property? portion you ow | | |
| | | | At least one of the debtors | and another | | | |
| | | | Check if this is communi instructions) | ty property (see | | | |
| | mples: Boats, trailers, motors | • | er recreational vehicles, other v t, fishing vessels, snowmobiles, m | • | | | |
| Exa | mples: Boats, trailers, motors No Yes | • | | otorcycle accessori | | claims or exemptions. F | |
| Example Exampl | mples: Boats, trailers, motors No Yes Make Model: | • | t, fishing vessels, snowmobiles, m Who has an interest in the plone. | otorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> | |
| Example Exampl | mples: Boats, trailers, motors No Yes Make | • | t, fishing vessels, snowmobiles, m Who has an interest in the prone. Debtor 1 only | otorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert | |
| Example Exampl | mples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, m Who has an interest in the plone. | otorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> | |
| Example Exampl | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only | otorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the | |
| Example Exampl | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only | otorcycle accessori roperty? Check y and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the | |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. F | |
| 4.1 | Make Model: Other information: Make Model: Make Model: Make Model: Model: Model: Model: Model: Model: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule ims Secured by Property Prope | |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | claims on Schedule ims Secured by Propertion you own? | |
| 4.1 | Make Model: Other information: Make Model: Make Model: Make Model: Model: Model: Model: Model: Model: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | claims on Schedule wires Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule wires Secured by Propert Current value of the | |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Creditors Control of the secured the amount of any secu Creditors Who Have Clate Control of the secured the secur | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule hims Secured by Propert | |
| 4.1 | Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only | roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the | |
| 4.1 | Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | roperty? Check y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule hims Secured by Propert Current value of the | |
| Exal 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | s, personal watercraft | Who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors only Check if this is communi instructions. | roperty? Check y and another ty property (see roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? | claims on Schedule wires Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule wires Secured by Propert Current value of the | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 13 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Bedroom Set \$100.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Televisions (3) \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Used Clothing \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1300.00 for Part 3. Write that number here

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 14 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$10.00 17.1. Checking account: Country Side 17.2. Checking account: 17.3. Savings account: Country Side \$75.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Healthcare Associates: Credit Union \$1050.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 15 of 68

| Debt | tor 1 Elizabeth | | Martin-Hoskins | Case number (if known) | |
|------|--|--|----------------------------------|--------------------------------------|------------|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfe Issuer name: | checks, promissory notes, a | nd money orders. | |
| | | - | | | · |
| 21. | Retirement or pension Examples: Interests in If | | , thrift savings accounts, or o | ther pension or profit-sharing plans | |
| | No | | | | |
| | ✓ Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | Advocate Health Care | | \$28000.00 |
| | . , | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | - |
| 22. | | d deposits you have made so that with landlords, prepaid rent, public | | | |
| | 163 | Electric: | - | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | - |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | - | | |
| | | Other: | | | |
| 23. | | or a periodic payment of money to | you, either for life or for a nu | mber of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 16 of 68

| Debt | tor 1 Elizabeth First Name | | Martin-Hoskins Case number (if known) Last Name | |
|------|---|---|---|---|
| 24. | Interests in a | n education IRA, in an account in a qualified | ABLE program, or under a qualified state tuition program. | • |
| | | 530(b)(1), 529A(b), and 529(b)(1). | | |
| | ✓ No Yes | Institution name and description. Separately file | the records of any interests.11 U.S.C. § 521(c): | |
| | | | | |
| | | | | |
| 25. | | able or future interests in property (other that or your benefit | n anything listed in line 1), and rights or powers | |
| | No Yes. Desc | ribe | | |
| 26. | - | yrights, trademarks, trade secrets, and other | | |
| | Examples: Inte | ernet domain names, websites, proceeds from ro | yaities and licensing agreements | |
| | Yes. Desc | ribe | | |
| 27. | Licenses, fra | nchises, and other general intangibles | | |
| | | | ociation holdings, liquor licenses, professional licenses | |
| | ✓ No Yes. Desc | rihe | | 1 |
| | 100. 2000 | | | |
| | | | | |
| Mor | ney or propei | ty owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or propei | | | portion you own? Do not deduct secured |
| | Tax refunds o | wed to you | Enderel | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or ✓ No Yes. Give sabou | wed to you specific information t them, including whether | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give s about | wed to you specific information | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t | specific information t them, including whether already filed the returns t | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past | specific information t them, including whether already filed the returns t | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and if Family support Examples: Past | specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spousal support, chil | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and if Family support Examples: Past | specific information t them, including whether already filed the returns t | State: Local: Id support, maintenance, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and if Family support Examples: Past | specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spousal support, chil | State: Local: Id support, maintenance, divorce settlement, property settlemer Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and if Family support Examples: Past | specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spousal support, chil | State: Local: Id support, maintenance, divorce settlement, property settlemer Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give sabout you a and if Family support Examples: Past | specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spousal support, chil | State: Local: Id support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give s about you a and to Family support Examples: Past ✓ No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years | State: Local: Id support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: ty benefits, sick pay, vacation pay, workers' compensation, | \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give s about you a and to Family support Examples: Past ✓ No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years | State: Local: Id support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: ty benefits, sick pay, vacation pay, workers' compensation, | \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousal support, chil specific information s someone owes you aid wages, disability insurance payments, disability insurance payments, disability insurance payments, disability insurance payments, where it is a someone owes you are included in the sound in the payments of the paymen | State: Local: Id support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: ty benefits, sick pay, vacation pay, workers' compensation, | \$0.00 |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 17 of 68

| Deb | tor 1 Elizabeth | | Martin-Hoskins | Case number (if known) | |
|------|--|---------------------------|---|--|--|
| | First Name | Middle Name | e Last Name | | |
| 31. | Interests in insurance Examples: Health, disabil | | alth savings account (HSA); credit, hon | neowner's, or renter's insurance | |
| | Yes. Name the insur of each policy and lie | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | | of a living trust, expect | someone who has died proceeds from a life insurance policy, o | or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | | | you have filed a lawsuit or made a durance claims, or rights to sue | demand for payment | |
| | ✓ No Yes. Describe | | | | |
| 34. | Other contingent and u | unliquidated claims o | f every nature, including countercla | ims of the debtor and rights | |
| | ✓ No Yes. Describe | | | | |
| 35. | Any financial assets yo | u did not already list | | | |
| | ✓ No Yes. Describe | | | | |
| 36. | | - | m Part 4, including any entries for p | • • | \$29135.00 |
| Dort | Dosoribo Any Ru | sinoss Polatod Pr | onorty Vou Own or Have an Inte | erest In. List any real estate in Pa | .+ 1 |
| Part | | | | | |
| 37. | No. Go to Part 6. Yes. Go to line 38. | y legal or equitable in | iterest in any business-related prop | erty? | Current value of the portion you own? |
| 38. | Accounts receivable of | r commissions vou alı | ready earned | | Do not deduct secured claims or exemptions |
| | ✓ No Yes. Describe | | • | | |
| 39. | Office equipment, furni Examples: Business-rela | | e, modems, printers, copiers, fax mach | ines, rugs, telephones, desks, chairs, ele | ctronic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 18 of 68

| Debt | tor 1 Elizabeth | Martin-Hoskins | Case number (if known) | |
|----------|--|--|-----------------------------|--|
| | First Name Middle Nam | | | |
| 40. | Machinery, fixtures, equipment, supplies yo | u use in business, and tools of your trac | de | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 1.1 | In the second se | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 12 | Interests in partnerships or joint ventures | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | Name of entity: | % of ownership: | |
| | Yes. Give specific | Name of chity. | 70 of ownership. | |
| | information about them | | | _ |
| | | | | |
| | | | <u> </u> | |
| 12 (| Customer lists, mailing lists, or other compile | otiono | | |
| 43. | | ations | | |
| | ✓ No | | | |
| | Yes. Do your lists include personally identif | iable information (as defined in 11 U.S.C. § | § 101(41A))? | |
| | ☐ No | | | |
| | Yes. Describe | | | |
| | Tee: Beesings | | | |
| 44. | Any business-related property you did not a | Iready list | | |
| | ☑ No | | | |
| | Yes. Give specific | | | |
| | information | | | |
| | | | | |
| | | | | |
| | | - | | <u> </u> |
| | | | | |
| | | | | |
| | | - | | |
| | | | | |
| | dd the dollar value of all of your entries from art 5. Write that number here | | | |
| • | | | | |
| Part | t 6: Describe Any Farm- and Commerc | | Own or Have an Interest In. | |
| | If you own or have an interest in farmland, list i | t in Part 1. | | |
| 46. | Do you own or have any legal or equitable i | nterest in any farm- or commercial fish | ing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | Yes. Go to line 47. | | | portion you own? Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | | | |
| | Examples: Livestock, poultry, farm-raised fish | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 19 of 68

| Debt | tor 1 Elizabeth First Name | | lartin-Hoskins (| Case number (if known) | |
|--------------|----------------------------|--|------------------------|------------------------------|--------------|
| 48. | Crops-either growing | | | | |
| | No Yes. Describe | | | | |
| 49. | Farm and fishing equip | oment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | at almost Pat | | |
| 51. | | rcial fishing-related property you did n | ot aiready list | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| | | II of your entries from Part 6, including | | | |
| • | | | | L | |
| | | | | | |
| Part | 7: Describe All Pro | perty You Own or Have an Intere | st in That You Did Not | List Above | |
| 53. | | perty of any kind you did not already liss s, country club membership | st? | | |
| | ✓ No | , , | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | ll of your entries from Part 7. Write tha | t number here | | • |
| | | • | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals of | f Each Part of this Form | | | |
| | | | | | |
| 55. I | Part 1: Total real estate | , line 2 | | / | |
| 56. | oart 2 total vehicles, lin | e 5 | \$2175.00 | | |
| 57. P | art 3: Total personal an | nd household items, line 15 | \$1300.00 | | |
| 58. P | art 4: Total financial as | ssets, line 36 | \$29135.00 | | |
| 59. I | Part 5: Total business-re | elated property, line 45 | | | |
| 60. I | Part 6: Total farm- and f | fishing-related property, line 52 | | | |
| 61. I | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62.1 | Гotal personal property. | . Add lines 56 through 61 | \$32610.00 | Copy personal property total | + \$32610.00 |
| | | | | | \$32610.00 |
| 63. T | otal of all property on S | Schedule A/B. Add line 55 + line 62 | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 20 of 68

| Debtor 1 | btor 1 Elizabeth | | Martin-Hoskins | Case number (if known) | |
|----------|------------------|-------------|----------------|------------------------|--|
| | First Name | Middle Name | Last Name | | |

Schedule A/B: Property. Additional page

| Part 3: Describe | Your Personal and Household Items | | | | |
|--------------------|---|----------|--|--|--|
| Do you own or ha | Do you own or have any legal or equitable interest in any of the following items? | | | | |
| 6.2. Household goo | ds and furnishings | | | | |
| No | | | | | |
| Yes. Describe | Living Room Set | \$300.00 | | | |
| 6.3. Household goo | ds and furnishings | | | | |
| No | | | | | |
| Yes. Describe | Kitchen Table & chairs | \$100.00 | | | |
| 6.4. Household god | ds and furnishings | | | | |
| No | | | | | |
| Yes. Describe | Misc. Household Goods | \$400.00 | | | |
| 7.2. Electronics | | | | | |
| No | | | | | |
| Yes. Describe | Tablet & Laptop | \$100.00 | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 21 of 68

| Fill in this information to identify your case: | | | | | | | |
|---|------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Elizabeth | | Martin-Hoskins | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number (If known) | | | | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Identity the Property You Clair | n as Exempt | | | | |
|----|---|---|---|---|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | exempt, fill in the information below. | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | |
| | Brief description: Nissan Altima, 2011, 2011 Nissan Altima Line from Schedule A/B: 03 | \$2,175.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | |
| | Brief description: Bedroom Set Line from Schedule A/B: 06 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 22 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known)
First Name Middle Name Last Name

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|---|------------------------------------|
| | Copy the value from Schedule A/B | | |
| Brief description: | \$300.00 | \$300.00 | 735 ILCS 5/12-1001(b) |
| Living Room Set Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$100.00 | \$100.00 | 735 ILCS 5/12-1001(b) |
| Kitchen Table & chairs Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$100.00 | £100.00 | 735 ILCS 5/12-1001(b) |
| Misc. Jewelry Line from Schedule A/B: 12 | | \$100.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$100.00 | √ | 735 ILCS 5/12-1001(a) |
| Misc. Used Clothing Line from Schedule A/B: 11 | | \$100.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$100.00 | V \$100.00 | 735 ILCS 5/12-1001(b) |
| Televisions (3) Line from Schedule A/B: 07 | | \$100.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$100.00 | \$100.00 | 735 ILCS 5/12-1001(b) |
| Tablet & Laptop Line from Schedule A/B: 07 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$400.00 | \$400.00 | 735 ILCS 5/12-1001(b) |
| Misc. Household Goods Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$1,050.00 | \$1,050.00 | 735 ILCS 5/12-1001(b) |
| Other financial account, Healthcare Associates: Credit Union | | 100% of fair market value, up to any applicable statutory limit | _ |
| Line from Schedule A/B: 17 | | | |
| Brief description: Checking account, | \$10.00 | \$10.00 | 735 ILCS 5/12-1001(b) |
| Country Side Line from | | 100% of fair market value, up to any applicable statutory limit | |
| Schedule A/B:17 Brief description: | \$75.00 | | 735 ILCS 5/12-1001(b) |
| Savings account, Country Side | ψ10.00 | \$75.00 100% of fair market value, up to any | _ |
| Line from Schedule A/B: 17 | | applicable statutory limit | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 23 of 68

| Del | btor 1 Elizabeth | | Martin-Hoskins | Case number (if known) | |
|-----|--|---|------------------------------|---|------------------------------------|
| | First Name Mid | Idle Name | Last Name | | |
| Par | t 2: Additional Page | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Check only one bo | emption you claim x for each exemption. | Specific laws that allow exemption |
| | Brief description: 401(k) or similar plan, Advocate Health Care Line from Schedule A/B: 21 | \$28,000.00 | 100% of fair rapplicable sta | \$28,000.00 market value, up to any atutory limit | 735 ILCS 5/12-1006 |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 24 of 68

| | | DO | cument Page 24 of 6 | 00 | | |
|---|---|--|---|---|---|------------------------------------|
| Fill in this infor | mation to identify your cas | se: | | | | |
| Debtor 1 | Elizabeth | | Martin-Hoskins | | | |
| Dahta : 0 | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number (If known) | | | (State) | | | |
| Official | Form 106D | | | 1 | | Check if this is an amended filing |
| | | ors Who Hav | ve Claims Secure | ed by Prop | | 12/15 |
| 1. Do any o | e number (if known). creditors have claims se | ecured by your properl it this form to the court v | nber the entries, and attach it to t ty? with your other schedules. You hav | | | es, write your |
| 2. List all separate | secured claims. If a creditely for each claim. If more the | nan one creditor has a part | ured claim, list the creditor claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Creditor's PO BO Numb IRVING City Who ow Det Det Det At le | TX 75016 State ZIP Code ves the debt? Check one. btor 1 only btor 2 only btor 1 and Debtor 2 only east one of the debtors a nother eck if this claim relates a community debt | 2011 Nissan Altima As of the date you file. Contingent Unliquidated Disputed Nature of lien. Check at a agreement you rear loan) Statutory lien (such Judgment lien from Other (including a rie | made (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset) | \$10,808.00 | \$4,350.00 | <u>\$6,458.00</u> |
| incurre | | Last 4 digits of accour | nt number1001 | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$10,808.00

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 25 of 68

| F-11 - | | | | | | | | |
|---|---|--|---|--|--|--|---|--|
| HIII II | n this infori | mation to identify your c | ase: | | | | | |
| Deb | tor 1 | Elizabeth | | Martin-Hoskins | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | = | | | | | | |
| (Spo) | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ed States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case (If kno | e number own) | | | | | | | |
| Off | icial F | orm 106E/F | | | | Che | ck if this is an | amended filing |
| Sc | hedu | ıle E/F: Cre | editors Who | Have Unse | cured Claims | | | 12/15 |
| other Form clain the e know | r party to a 106A/B) a ns that are entries in the n). | any executory contracts and on <i>Schedule G: Exe</i> listed in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims | could result in a claim. xpired Leases (Official Secured by Property. It | is and Part 2 for creditors wit Also list executory contracts Form 106G). Do not include a more space is needed, copy top of any additional pages, w | on <i>Schedu</i> ny creditor the Part yo | ule A/B: Prop s with partia ou need, fill i | perty (Official ally secured t out, number |
| 1. | | reditors have priority un Go to Part 2. | secured claims against yo | ou? | | | | |
| 2. | List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | |
| | | | | | | Total | Priority | Nonpriority |

claim

amount

amount

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 26 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Advocate Medical Group \$900.00 Last 4 digits of account number Nonpriority Creditor's Name 8550 W Byn Mawr Ave # 8th Floor When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60631 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Medical Bill Other. Specify ___ Is the claim subject to offset? Yes CHASE CARD 4.2 \$762.00 Last 4 digits of account number Nonpriority Creditor's Name BANK ONE CARD SERV 2500 WESTFIELD DRI When was the debt incurred? 10/1998 Number As of the date you file, the claim is: Check all that apply. Contingent **ELGIN** Illinois 60124 Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes MIDLAND FUNDING \$2,153.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/2013 2365 Northside Drive Number Street As of the date you file, the claim is: Check all that apply. Contingent San Diego California 92108 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 UnknownLoanType Is the claim subject to offset? Other. Specify _ No Yes

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 27 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 PORTFOLIO RECOV ASSOC \$633.00 Last 4 digits of account number _ Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 7/2013 Street As of the date you file, the claim is: Check all that apply. Contingent 23502 **NORFOLK** Virginia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes Resurgence Capital LLC \$7,888.45 Last 4 digits of account number Nonpriority Creditor's Name 1161 Lake Cook Road Suite D When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Deerfield 60015 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

Other. Specify Pending Suit: 2016-M1-104276

Check if this claim relates to a community debt

Is the claim subject to offset?

✓ No Yes

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 28 of 68

| ebtor 1 | Elizabeth | | | Martin-Hoskins | Case number (if known) |
|------------------------|---|---|---|---|---|
| | First Name | | Middle Name | Last Name | |
| art 3: | List Others to | Be Notified A | About a Debt That | t You Already Listed | |
| colle colle cred | ection agency is ection agency h ditors here. If yo | s trying to colle ere. Similarly, i u do not have a | ct from you for a de f you have more tha | ebt you owe to someone an one creditor for any o | a debt that you already listed in Parts 1 or 2. For example, if a else, list the original creditor in Parts 1 or 2, then list the f the debts that you listed in Parts 1 or 2, list the additional ts in Parts 1 or 2, do not fill out or submit this page. |
| Res Nam | urgence Legal Gi | oup | | On which entry in | Part 1 or Part 2 did you list the original creditor? |
| | 0 Lakeside Dr | | | Line 4.5 | of (Check Part 1: Creditors with Priority Unsecured Claims |
| Nur | nber Street | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Ban | ınockburn | Illinois | 60015 | Last 4 digits of ac | count number |
| City | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 29 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known)

| First Nar | ne Middle Name Last Name | | | |
|--------------------------|--|---------|---------------------------|--------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting purp | oses o |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. | 0- | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write | 6i. | \$12,336.45 | |
| | that amount here. | | | |
| | 6i Total Add lines 6f through 6i | 6i | \$12,336.45 | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 30 of 68

| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Elizabeth | | Martin-Hoskins |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | ankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or comp | oany with whom you have | the contract or lease | State what the contract or lease is for |
|-----|-----------------------------------|-------------------------|-----------------------|---|
| 2.1 | Lee, Marva Name 9145 S Lowe | | _ | Residential Lease, Debtor is Lessee, Yearly Lease |
| | Number | Street | | |
| | Chicago | Illinois | 60620 | |
| | City | State | Zip Code | |

Case 17-36/28 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main

| | | Case 17-3042 | | | e 31 of 68 |) | Desc Main | |
|--------------------|----------------------------------|---|---|------------------------------|------------------------|------------------------|-----------------------------|-------|
| Fill in t | nis inforr | nation to identify your c | ase: | | | | | |
| Debtor | 1 | Elizabeth First Name | Middle Name | Martin-Hoskins Last Name | | | | |
| Debtor (Spouse, | | First Name | Middle Name | Last Name | | | | |
| United | States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case n | | | | (Oldio) | | | | |
| Ott: | -:-!! | Tawaa 10011 | | | _ | | Check if the amended | |
| | | Form 106H • H: Your Cod | lahtara | | | | | 12/15 |
| the ent known) | ries in the Answer Po you had No | ne boxes on the left. At every question. ave any codebtors? (If | nsible for supplying correct tach the Additional Page t you are filing a joint case, do ou lived in a community pro | o this page. On the to | op of any Addit | tional Pages, write yo | our name and case number | |
| | California No | , Idaho, Louisiana, Neva . Go to line 3. s. Did your spouse, form No | da, New Mexico, Puerto Rico | , Texas, Washington, a | nd Wisconsin.) e time? | | | |
| | | | nity state or territory did you | | Fill in th | e name and current ad | dress of that person. | |
| | | City | State | Zip Co | de | | | |
| | again as | a codebtor only if that | ebtors. Do not include you t person is a guarantor or c 6E/F), or <i>Schedule G</i> (Offici | osigner. Make sure y | ou have listed | the creditor on Sche | edule D (Official Form 106D | 0), |

Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: Hoskins, Golden Schedule D, line 2.1 $\overline{\mathbf{V}}$ Name Schedule E/F, line_____ 9145 S. Lowe Number Street Schedule G, line Chicago 60620 Illinois City State Zip Code

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 32 of 68

| | | D00 | current i | agc 32 | | | | |
|--------------------------------|--|----------------------------|---------------------------------|-------------------|-------------------|---|------------------|-------------------|
| Fill in this in | nformation to identify | your case: | | | | | | |
| Debtor 1 | Elizabeth | | Martin-Ho | skins | | | | |
| | First Name | Middle Name | Last Name | 9 | — Che | eck if this is: | | |
| Debtor 2 (Spouse, if filing | ng) First Name | Middle Name | Last Name | | - _ | An amended t | iling | |
| | es Bankruptcy Court for | Northern | District of Illinois | | | | | petition chapter |
| the: | , , | 110/11/01/11 | State | | - _ | expenses as o | of the following | date: |
| Case number | er | | | | _ | MM / DD / YY | YY | |
| Official | Form 106I | | | | | | | |
| | ule I: Your In | come | | | | | | 12/ ⁻ |
| spouse. If m number (if l | | | | | | | | |
| 1. Fill in yo | our employment | | Debtor 1 | | | Debtor 2 | | |
| informat | tion. | Employment status | C Smalaured | | | ✓ Employed | | |
| attach a | ave more than one job, separate page with ion about additional | zimpioyimoni diatao | Employed Not Employed | oyed | | Not Employ | | |
| employe | | Occupation | | | | | | |
| | part time, seasonal, or bloyed work. | Employer's name | Advocate Heal | th Care | | Document 1 | echnologies LL | _C |
| • | tion may include student emaker, if it applies. | Employer's address | 4220 W. 95th St. Number Street | | | Two Ravinia Drive, Suite 850 Number Street | | 0 |
| | | | - | | | _ | | |
| | | | Oak Lawn City | Illinois State | 60453 Zip Code | Atlanta City | Georgia State | 30346 Zip Code |
| | | How long employed there? | | | | | | |
| Estimate n | | Monthly Income | n. If you have not | hing to repo | rt for any line, | write \$0 in the | space. Include | e your non-filing |
| • | ess you are separated. | e more than one employer, | combine the info | rmation for a | all employers fo | or that nerson | on the lines he | low If you need |
| | e, attach a separate she | | | | Debtor 1 | For Debtor | 2 or | ion. Il you nocu |
| | | ary, and commissions (befo | | | \$5,111.58 | - Hon-lining Sp | \$2,171.87 | |
| be. | | ,salate mak the monthly | | | | | | |
| 3. Estima | ate and list monthly ove | rtime pay. | 3. | | + \$0.00 | | + \$0.00 | |

\$5,111.58

\$2,171.87

4. Calculate gross income. Add line 2 + line 3.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 33 of 68

| Debtor 1Elizabeth | Martin-Hoskins | Case number | | |
|---|------------------------|--------------------------|-----------------------------------|-------------------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → 4. | \$5,111.58 | \$2,171.87 | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$976.65 | \$378.99 | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | \$0.00 | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$153.27 | \$0.00 | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | \$0.00 | |
| 5e. Insurance | 5e | \$263.47 | \$124.09 | |
| 5f. Domestic support obligations | 5f | \$0.00 | \$0.00 | |
| 5g. Union dues | 5g | \$0.00 | \$0.00 | |
| 5h. Other deductions. Specify: | 5h. + _ | \$290.05 + | \$0.00 | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5h$. | +5f + 5g 6 | \$1,683.44 | \$503.08 | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from li | ne 4. 7. <u></u> | \$3,428.14 | \$1,668.79 | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, at the total monthly net income. | nd 8a. | \$0.00 | \$0.00 | |
| 8b. Interest and dividends | 8b. | \$0.00 | \$0.00 | |
| 8c. Family support payments that you, a non-filing spouse, of dependent regularly receive | or a | _ | | |
| Include alimony, spousal support, child support, maintenand divorce settlement, and property settlement. | e, 8c. <u> </u> | \$0.00 | \$0.00 | |
| 8d. Unemployment compensation | 8d | \$0.00 | \$0.00 | |
| 8e. Social Security | 8e | \$0.00 | \$0.00 | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefunder the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | iits 8f. | \$0.00 | \$0.00 | |
| 8g. Pension or retirement income | 8g. | \$0.00 | \$0.00 | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 + | \$0.00 | |
| 9. Add all other income Add lines $8a + 8b + 8c + 8d + 8e + 8f + 8g$ | g + 8h. 9. | \$0.00 | \$0.00 | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing | spouse 10. | \$3,428.14 + | \$1,668.79 | \$5,096.93 |
| 11. State all other regular contributions to the expenses that y Include contributions from an unmarried partner, members of yo friends or relatives. Do not include any amounts already included in lines 2-10 or am | ur household, your d | ependents, your roomn | | |
| Specify: | | | 1 | 1. +\$0.00 |
| 12. Add the amount in the last column of line 10 to the amount | | | | |
| Write that amount on the Summary of Schedules and Statistical S | Summary of Certain L | abilities and Helated Da | ta, if it applies | \$5,096.93 Combined monthly income |
| 13. Do you expect an increase or decrease within the year after No. Yes. Explain: | er you file this form? | | | |
| | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 34 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if First Name Middle Name Last Name known)

Part 2: Give Details About Monthly Income

Official Form 106I. Additional page.

| | For Debtor 1 | non-filing spouse |
|---------------------------------------|--------------|-------------------|
| 5h.Other payroll deductions. Specify: | | |
| 1. Loan | \$151.93 | \$0.00 |
| 2. Parking | \$51.46 | \$0.00 |
| 3. TOBSUREE | \$86.67 | \$0.00 |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 35 of 68

| | | Docu | ment Page 35 of 68 | 3 | |
|---|--|--|--|--------------------------|---|
| Fill in this inform | mation to identify | your case: | | | |
| Debtor 1 Debtor 2 (Spouse, if filing) | Elizabeth First Name | Middle Name Middle Name | Martin-Hoskins Last Name Last Name | Check if this is: | ng |
| | ankruptcy Court fo | | District of Illinois (State) | A supplement sl | nowing post-petition chapter 13 the following date: |
| Case number (If known) | | | | MM / DD / YYYY | <u>, </u> |
| | Form 100 | 6J Expenses | | | 12/15 |
| information. If r (if known). Ansv | | | | | |
| 1. Is this a joir | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. Do | oes Debtor 2 live | in a separate household? | | | |
| _ [| No | | | | |
| | Yes. Debtor 2 r | nust file Official Forms 106J-2, Expen | ses for Separate Household of Debi | for 2. | |
| 2. Do you have | e dependents? | No | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child | Dependent's age 19 years | Does dependent live with you? No. |
| | | | Office | 10 years | ✓ Yes. |
| 3. Do your exp expenses of than yourself and dependents | people other your | ✓ No Yes | | | |
| - | | oing Monthly Expenses | | | |
| Estimate your | expenses as of y f a date after the | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | • | • | • |
| | • | non-cash government assistance i uded it on <i>Schedule I: Your Incom</i> e | - | | Your expenses |
| | or home owners | ship expenses for your residence. In t. 4. | clude first mortgage payments and | | \$1,150.00 |
| If not incl | uded in line 4: | | | | |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 36 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known)
First Name Middle Name Last Name

| First Name | Middle Name Last Name | | |
|---|--|------------|---------------|
| | | | Your expenses |
| 5. Additional mortgage payme | nts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural ga | S | 6a. | \$400.00 |
| 6b. Water, sewer, garbage col | ection | 6b. | \$200.00 |
| 6c. Telephone, cell phone, Int | ernet, satellite, and cable services | 6c. | \$275.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping sup | plies | 7. | \$1,000.00 |
| 8. Childcare and children's ed | ication costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cl | eaning | 9. | \$265.00 |
| 10. Personal care products an | d services | 10. | \$249.00 |
| 11. Medical and dental expens | es | 11. | \$125.00 |
| Transportation. Include gas Do not include car payments | maintenance, bus or train fare. | 12. | \$500.00 |
| 13. Entertainment, clubs, recre | eation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions a | nd religious donations | 14. | \$150.00 |
| 15. Insurance. Do not include insurance ded | ucted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$90.00 |
| 15d. Other insurance. Specify | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payme | nts: | | |
| 17a. Car payments for Vehicle | 1 | 17a | \$392.00 |
| 17b. Car payments for Vehicle | 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | . 17c | \$0.00 |
| 17d. Other. Specify: | | . 17d | \$0.00 |
| | maintenance, and support that you did not report as deduct | ed from | \$0.00 |
| | e I, Your Income (Official Form 106I). | 18. | |
| | o support others who do not live with you. | | |
| Specify: | o not included in lines 4 on 5 of this forms on an Cabadula I. V | 19. | \$0.00 |
| 20a. Mortgages on other prop | es not included in lines 4 or 5 of this form or on Schedule I: Y ertv | 20a | \$0.00 |
| 20b. Real estate taxes. | , | 20a 20b | \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | | |
| 20d. Maintenance, repair, and | | 20c | \$0.00 |
| 20e. Homeowner's associatio | | 20d | \$0.00 |
| 200. Homeowner 3 associatio | 1 of condominatif dues | 20e | \$0.00 |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 37 of 68

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 38 of 68

| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|----------------|------------------------------|--|--|--|
| Debtor 1 | Elizabeth | Martin-Hoskins | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number | | _ | | | | |

Official Form 106Dec

U.S.C. §§ 152, 1341, 1519, and 3571.

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

✓ No

☐ Yes. Name of person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

★ /s/ Elizabeth Martin-Hoskins

Signature of Debtor 1

Date 12/7/2017

MM/DD/YYYY

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 39 of 68

| Fill in this | information to identify you | ir case. | | | | |
|---------------------------|---|---------------------------|---|--|----------|---|
| Debtor 1 | Elizabeth | | Martin-Ho | skins | | |
| Bobioi i | First Name | Middle Nar | | | | |
| Debtor 2 (Spouse, if f | iling) First Name | Middle Nar | ne Last Nam | <u>e</u> | | |
| United St | ates Bankruptcy Court for the | ne: Northern | District of Illino | is | | |
| Case nun | nber | | (State | e) | | |
| (If known) | | | | | | Check if this is |
| Offici | ial Form 107 | | | | | amended filing |
| State | ment of Financ | ial Affairs fo | r Individuals I | Filing for Bank | ruptcy | 04/ |
| informat number (| mplete and accurate as ion. If more space is ne (if known). Answer even | eded, attach a separa | ate sheet to this form. | On the top of any addi | | |
| Part 1: | Give Details About Yo | ur Marital Status ar | nd Where You Lived | Before | | |
| 1. Wh | nat is your current marital | status? | | | | |
| ▼ | Married | | | | | |
| | Marrieu | | | | | |
| Ë | Not married | | | | | |
| | | you lived anywhere o | ther than where you liv | re now? | | |
| | Not married | you lived anywhere o | ther than where you liv | re now? | | |
| | Not married | | | | | |
| | Not married ring the last 3 years, have | | | | | |
| | Not married ring the last 3 years, have | s you lived in the last 3 | | | | Dates Debtor 2 lived there |
| | Not married ring the last 3 years, have No Yes. List all of the places | s you lived in the last 3 | years. Do not include v | where you live now. Debtor 2: | | there |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: | s you lived in the last 3 | years. Do not include v | where you live now. | | |
| | Not married ring the last 3 years, have No Yes. List all of the places | s you lived in the last 3 | years. Do not include v | where you live now. Debtor 2: | | there |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace | s you lived in the last 3 | years. Do not include v Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 | | there Same as Debtor 1 |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace Number Street Chicago Illinois | s you lived in the last 3 | years. Do not include v Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street | 7in Oods | there Same as Debtor 1 From |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace Number Street | s you lived in the last 3 | years. Do not include v Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street City State | Zip Code | there Same as Debtor 1 From To |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace Number Street Chicago Illinois | s you lived in the last 3 | years. Do not include v Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street | Zip Code | there Same as Debtor 1 From |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace Number Street Chicago Illinois | 60620 Zip Code | years. Do not include v Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street City State | Zip Code | there Same as Debtor 1 From To |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace Number Street Chicago Illinois City State | 60620 Zip Code | years. Do not include v Dates Debtor 1 lived there From To 11/2015 | Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| | Not married ring the last 3 years, have No Yes. List all of the places Debtor 1: 9343 S. Wallace Number Street Chicago Illinois City State | 60620 Zip Code | years. Do not include v Dates Debtor 1 lived there From To11/2015 | Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 40 of 68

Martin-Hoskins

Debtor 1 Elizabeth Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$60664.95 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$61462.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$57153.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 41 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 42 of 68

| or 1 | Elizabeth | | | Ma | artin-Hoskins | Case number | (if known) |
|--------------------|--|--|--|---|--|---|--|
| | First Name | | Middle Name | Las | t Name | | |
| nsi corp age | ders include your porations of whic | relatives; a h you are a for a busin | iny general partners in officer, director, p less you operate as | s; relatives of any person in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | yments to a | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | _ | ranteed or cosigne | • | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | - | | | |
| | | | | | | | |
| | Number Street | | | | | | |
| | Number Street City | State | Zip Code | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 43 of 68

Debtor 1 Elizabeth Martin-Hoskins Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Civil Pending Cook County Circuit Court Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-104276 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Pay Check \$0 Resurgence Capital LLC Creditor's Name Explain what happened 1161 Lake Cook Road Suite D Number Street Property was repossessed. Property was foreclosed. Deerfield Illinois 60015 Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 44 of 68

| Debto | | Elizabeth First Name | М | iddle Name | Martin-Hoskins Last Name | Case number (if known) | | |
|-------|----------|---|------------------|--------------------|--|-------------------------------|--------------------------|--------------------|
| 11. | | hin 90 days before counts or refuse to No | | | ny creditor, including a ban owed a debt? | k or financial institution, s | set off any amou | nts from your |
| | Ħ | Yes. Fill in the deta | ails. | | | | | |
| | | | | | Describe the action the c | reditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | | |
| | | Number Street | | | | | | |
| | | | | | Last 4 digits of account nur | mber: XXXX- | | |
| | | City | State | Zip Code | | | | |
| | | hin 1 year before yo ointed receiver, a | | | y of your property in the po | ssession of an assignee fo | r the benefit of c | reditors, a court- |
| | ✓ | No Yes | | | | | | |
| Part | 5: | List Certain Gifts | s and Contri | butions | | | | |
| 13. | | | | | ou give any gifts with a tota | ul value of more than \$600 | ner nerson? | |
| 10. | ✓ | No | you med for t | Janki upicy, did y | ou give any gitts with a tota | ii value of more than 9000 | per person: | |
| | | Yes. Fill in the det | tails for each o | gift. | | | | |
| | | Gifts with a total per person | value of more | than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | | |
| | | Person to Whom Y | ou Gave the G | ift | | | | |
| | | Number Street | | | | | | |
| | | City | State | Zip Code | | | | |
| | | Person's relationsh | ip to you | | | | | |
| | | Person to Whom Y | ou Gave the G | <u>ift</u> | | | | |
| | | Number Street | | | | | | |
| | | | | | | | | |
| | | City | State | Zip Code | | | | |
| | | Person's relationsh | ip to you | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 45 of 68

| Debt | | Elizabeth | | Martin-Hoskins | Case number (if known | | _ |
|------|------------|--|------------------|--|------------------------------|---|--------------------|
| | | First Name Midd | dle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you filed for ban | ıkruptey, did yo | u give any gifts or contribution | ons with a total value of | more than \$600 | to any charity? |
| | _ | No | | 3 , 3 | | • | • |
| | 뇓 | Yes. Fill in the details for each gift | or contribution | | | | |
| | Ш | | | | | | |
| | | Gifts or contributions to charities that total more than \$600 | S | Describe what you contribu | uted | Date you contributed | Value |
| | | that total more than \$600 | | | | Contributou | |
| | | Charity's Name | | | | | |
| | | Offaity 3 Name | | | | | |
| | | | | | | | |
| | | Number Street | _ | | | | |
| | | | | | | | |
| | | City State Z | Zip Code | | | | |
| Part | 6: | List Certain Losses | | | | | |
| | | | | | | | |
| 15. | | hin 1 year before you filed for bank | ruptcy or since | you filed for bankruptcy, did | l you lose anything beca | use of theft, fire, | other disaster, or |
| | gan | nbling? | | | | | |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | Describe the property you lost an | nd | Describe any insurance co | verage for the loss | Date of your | Value of property |
| | | how the loss occurred | | Include the amount that insu | | loss | lost |
| | | | | pending insurance claims on A/B: Property. | line 33 of <i>Scriedule</i> | | |
| | | | | , , | | | |
| | | | | | | · | |
| Part | 7: | List Certain Payments or Tran | nsfers | | | | |
| | | out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No | | | ervices required in your bar | nkruptcy. | |
| | lacksquare | Yes. Fill in the details. | | | | | |
| | | | | Description and value of an transferred | y property | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | Attorney's Fee - 350.00 | | 12/7/2017 | \$350.00 |
| | | Person Who Was Paid | | , atomoy 5 1 60 - 000.00 | | | |
| | | 11101 S. Western Avenue | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | | 60643 | | | | |
| | | City State Z | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment, if N | Not You | | | | |
| | | Person Who Was Paid | | | | | |
| | | Person who was Paid | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | City State Z | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment, if N | Not You | | | | |
| | | mado alo i ayillolit, ii i | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 46 of 68

| Deb | or 1 | Elizabeth | | Martin-Hoskins | Case n | umber (if known) | | | |
|-----|------|---|-------------------------|---|------------|--------------------------------------|------------------------------------|---------|------------------------------|
| | | First Name | Middle Name | Last Name | _ | | | | |
| 17. | hel | hin 1 year before you file o you deal with your creo not include any payment o No Yes. Fill in the details. | ditors or to make payme | = | behalf p | ay or transfer | any property to a | anyone | who promised to |
| | Ш | | | | | | | | |
| | | | | Description and value of any particle transferred | property | | Date payment or transfer was made | Amo | unt of payment |
| | | Person Who Was Paid | | | | | | - | |
| | | Number Street | | | | | | | |
| | | | | | | | | | |
| | | City State | Zip Code | | | | | | |
| | | No Yes. Fill in the details. | | Description and value of prop transferred | erty | Describe any payments re in exchange | / property or ceived or debts p | paid | Date transfer was made |
| | | Person Who Received Tra | ansfer | | | | | | |
| | | Number Street | | | | | | | |
| | | - Street | | | | | | | |
| | | City State Person's relationship to y | • | | | | | | |
| | | Person Who Received Tra | ansfer | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to y | | | | | | | |
| 19. | ber | hin 10 years before you f reficiary? ese are often called asset-p No Yes. Fill in the details. | | you transfer any property to a se | ∍lf-settle | ed trust or sim | ilar device of whi | ich you | are a |
| | _ | | | Description and value of the | : propert | y transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 47 of 68

Debtor 1 Elizabeth Martin-Hoskins _ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 48 of 68

Martin-Hoskins Debtor 1 Elizabeth Case number (if known) Middle Name First Name Last Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 49 of 68

| Debt | | Elizabeth | N.C. | della Nassa | Martin-Hoskins | Case | number (if | known) | |
|------|----------|----------------------|---------------------|-------------------|---------------------------------------|----------------------|--------------|---|--------------------|
| | | First Name | Mic | ddle Name | Last Name | | | | |
| 26. | | | y in any judicial | or administra | tive proceeding under | any environment | al law? Ind | clude settlements and ord | ers. |
| | | No | | | | | | | |
| | | Yes. Fill in the det | tails. | | | | | | |
| | | | | С | ourt or agency | | Nature o | f the case | Status of the case |
| | | Case title | | | | | | | Pending |
| | | | | _ | ourt Name | | | | On appeal |
| | | Case number | | IN | umberStreet | | | | Concluded |
| | | • | | | ity State | Zip Code | | | |
| Part | 11: | Give Details Ab | oout Your Bus | siness or Con | nnections to Any Bus | siness | | | |
| 27. | Witl | nin 4 years before | you filed for ba | nkruptcy, did y | ou own a business or l | have any of the fo | ollowing co | onnections to any busines | s? |
| | | A sole propri | etor or self-emp | oloyed in a trad | le, profession, or other | activity, either ful | II-time or p | art-time | |
| | | | | - | C) or limited liability par | = | · | | |
| | | A partner in a | | , | , , , , , , , , , , , , , , , , , , , | (, | | | |
| | | | - | aina executive | of a corporation | | | | |
| | | _ | | | uity securities of a corp | oration | | | |
| | | Allowner or a | at least 5 /0 Of th | ie vourig or eq | uity securities or a corp | oration | | | |
| | ✓ | No. None of the a | above applies. (| Go to Part 12. | | | | | |
| | П | Yes. Check all tha | at apply above | and fill in the d | etails below for each b | usiness. | | | |
| | | | | | Describe the natu | re of the busines | s | Employer Identification I | number Do not |
| | | | | | | | | include Social Security r | |
| | | | | | _ | | | EIN: | |
| | | Business Name | | | | | | | |
| | | Number Street | | | Name of accounta | int or hookkeene | ır | Dates business existed | |
| | | City | State | Zip Code | - | int of Bookhoopo | • | From To | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | Describe the natu | re of the busines | s | Employer Identification include Social Security r | |
| | | Business Name | | | - | | | EIN: | |
| | | | | | - | | | Dotoo husinees suisted | |
| | | Number Street | | | Name of accounta | int or bookkeepe | r | Dates business existed | |
| | | City | State | Zip Code | - | | | From To | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | Describe the natu | re of the busines | s | Employer Identification include Social Security r | |
| | | | | | _ | | | EIN: | |
| | | Business Name | | | | | | | |
| | | Number Street | | | Name of accounta | int or bookkooss | ır | Dates business existed | |
| | | City | State | Zip Code | - | пт ог вооккеере | 71 | From To | |
| | | | | | | | | | |
| | | | | | | | | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 50 of 68

| Debt | tor 1 | Elizabeth | | | Martin-Hoskins | Case number (if known) |
|-------------------------------------|--------------|---|-----------------------------------|--|--|--|
| | | First Name | | Middle Name | Last Name | <u> </u> |
| 28. | | hin 2 years befor ditors, or other p No Yes. Fill in the d | parties. | bankruptcy, did yo | u give a financial statemen | t to anyone about your business? Include all financial institutions, |
| | | | | | Date issued | |
| | | | | | | |
| | | Name | | | MM/DD/YYYY | |
| | | Number Street | • | | • | |
| | | Number Street | L | | | |
| | | City | State | Zip Code | • | |
| | | | 5.55 | _,p | | |
| Part | 12: | Sign Below | | | | |
| t | rue a | and correct. I un kruptcy case ca | derstand that in result in fin | making a false stat es up to \$250,000, o | ement, concealing property or imprisonment for up to 20 | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | s/ Elizabeth Ma | | | |
| | | Sign | ature of Debtor | 1 | | Signature of Debtor 2 |
| | | Date | 12/7/2017 | | | Date 12/7/2017 |
| | Did yo | ou attach additie | onal pages to | Your Statement of I | Financial Affairs for Individu | als Filing for Bankruptcy (Official Form 107)? |
| Г | . . N | lo | | | | |
| | Y | 'es | | | | |
| | Did yo | ou pay or agree | to pay someo | ne who is not an att | orney to help you fill out ba | nkruptcy forms? |
| Į į | √ N | lo | | | | |
| ָ ֪֞֞֞֞֞֞֞֞֞֩֞֞֩֞֞֩֞֩֞֝֓֡֓֞֝֞֩֓֡ | = ' | es. Name of pers | on | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Page 51 of 68 Document

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distr | act of illinois | |
|-----|--|-------------------------------|---|-------------------------------|
| re_ | Elizabeth Martin-Hoskin | ıs | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATIO | ON OF ATTORNEY F | OR DEBTOR |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the | e petition in bankruptcy, or agreed to | o be paid to me, for services |
| | For legal services, I have agreed to ac | cept | | \$4,000.00 |
| | Prior to the filing of this statement I | nave received | | \$350.00 |
| | Balance Due | | | \$3,650.00 |
| 2 | . The source of the compensation paid | to me was: | | |
| | ✓ Debtor | Other (specify | <i>y</i>) | |
| 3 | . The source of the compensation paid | d to me is: | | |
| | ✓ Debtor | Other (specify | <i>y</i>) | |
| 4 | . I have not agreed to share the abmembers and associates of my la | | on with any other person unless the | ey are |
| | | v firm. A copy of the agreen | vith a other person or persons who a nent, together with a list of the name | |
| 5 | . In return for the above-disclosed fee a. Analysis of the debtor's finan bankruptcy; | - | gal service for all aspects of the bank g advice to the debtor in determinin | • |
| | b. Preparation and filing of any | petition, schedules, statem | ents of affairs and plan which may b | pe required; |
| | c. Representation of the debtor | at the meeting of creditors | and confirmation hearing, and any | adjourned hearings thereof; |
| | d. Representation of the debtor | in adversary proceedings a | and other contested bankruptcy mat | ters; |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does r | not include the following services: | |
| | | | | |
| | | CERTIFIC | CATION | |
| | certify that the foregoing is a complet tor(s) in this bankruptcy proceedings. | e statement of any agreeme | ent or arrangement for payment to r | ne for representation of the |
| | 12/7/2017 | | /s/ Morsheda Hashem | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | filing fee administrative fee |
|---|-------|----------------------------------|
| + | · · | |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 56 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Martin-Hoskins , Elizabeth Debtor(s) | Case No | Case No | | | |
|-----------------|--|---|--------------------------------------|--|--|--|
| | | Chapter. | Chapter13 | | | |
| | VERIFICATI | ON OF CREDITOR MAT | ΓRIX | | | |
| Ti knowledge | he above named Debtors hereby verify that e. | the attached list of creditors is to | rue and correct to the best of their | | | |
| Date: | 12/7/2017 | /s/ Martin-Hoski Martin-Hoskins Signature of De | , Elizabeth | | | |

Exeter Finance LLC PO BOX 166097 IRVING, TX, 75016

MIDLAND FUNDING PO Box 13105 Roanoke, VA, 24031

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

PORTFOLIO RECOV ASSOC 120 CORPORATE BLVD STE 1 NORFOLK, VA, 23502

Resurgence Capital LLC 1161 Lake Cook Road Suite D Deerfield, IL, 60015

Resurgence Legal Group 3000 Lakeside Dr #30 Bannockburn, IL, 60015

Advocate Medical Group 75 Remittance Dr Dept 1773 Chicago, IL, 60675

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 60 of 68

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to \$726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 12/7/2017 | | | | |
|------------|---------------------|-----------|------------------------|---------|-----|
| Signed: | | a.1.100 | | | |
| /s/ Elizat | oeth Martin-Hoskins | EMatrol ? | | | 1 1 |
| | | | /s/ Morsheda Hashem | mahrely | du |
| Debtor(s |) | | Attorney for Debtor(s) | | |

Do not sign if the fee amounts at top of this page are blank.

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 63 of 68

| Debtor 1 Elizabeth First Name | | Martin-Hoskins | Case number (if known) | | | |
|--|--|----------------------------|--|---|--|--|
| | | Last Name | | | | |
| Part 6: Answer These Qu | estions for Reporting Purposes 16a. Are your debts primarily | consumer debts? Co | | | | |
| you have? | "incurred by an individual | I primarily for a person | al, family, or household | purpose." | | |
| | ☐ No. Go to line 16b. ✓ Yes. Go to line 17. | | | | | |
| | Yes. Go to line 17. 16b. Are your debts primarily | business debts? Bus | <i>iness debts</i> are debts th | nat you incurred to obtain | | |
| | money for a business or i | | | = | | |
| No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | |
| | | | | | | |
| ^{17.} Are you filing under Chapter 7? | No. I am not filing under Cha | pter 7. Go to line 18. | | | | |
| Do you estimate that after any exempt property is excluded | | | after any exempt propert distribute to unsecured cr | y is excluded and administrative reditors? | | |
| and administrative | No. | | | | | |
| expenses are paid that funds will be available | Yes. | , | | | | |
| for distribution to | | | | | | |
| unsecured creditors? | | | | | | |
| 18. How many creditors | ✓ 1-49 → 50-99 | 1,000-5,000 5,001-10,00 | News News | | | |
| do you estimate that you owe? | 100-199 | 10,001-10,00 | liner liner | More than 100,000 | | |
| | 200-999 | Second | L | · | | |
| 19. How much do you | ☑ \$0-\$50,000 | \$1,000,001- | \$max |] \$500,000,001-\$1 billion | | |
| estimate your assets to be worth? | \$50,001-\$100,000 \$100,001-\$500,000 | hound | I-\$50 million [7] | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | |
| to be worth: | \$500,001-\$1 million | Booms | 01-\$500 million | More than \$50 billion | | |
| ²⁰ · How much do you | \$0-\$50,000 | \$1,000,001- | \$10 million | \$500,000,001-\$1 billion | | |
| estimate your | \$50,001-\$100,000 | \$10,000,001 | -\$50 million | \$1,000,000,001-\$10 billion | | |
| liabilities to be? | \$100,001-\$500,000 \$500,001-\$1 million | Second : | -\$100 million | \$10,000,000,001-\$50 billion | | |
| Part 7: Sign Below | \$500,001-\$1 million | | 71-900 mmon · L | More than \$50 billion | | |
| F | I have examined this petition, ar | nd I declare under pena | Ity of perjury that the ir | nformation provided is true and | | |
| , For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. | | | | | |
| | If I have chosen to file under Chof title 11, United States Code. | | | ble, under Chapter 7, 11,12, or 13 | | |
| | under Chapter 7. | Tanacistana tric ronor | available affect each ci | explain and randood to proceed | | |
| | If no attorney represents me and | | | | | |
| | out this document, I have obtain I request relief in accordance wi | | , , | * ',' | | |
| | I understand making a false stat | | | | | |
| | connection with a bankruptcy coboth. 18 U.S.C. §§ 152, 1341, 1 | | up to \$250,000, or imp | risonment for up to 20 years, or | | |
| | /s/ Elizabeth Martin-Hoskins | 21000 Wh. 14 | 12* | | | |
| | Signature of Debtor 1 | Jan March | Signature of Debto | or 2 | | |
| | Executed on 12/7/2017 | ()000/ | Executed on | MM (DD ()000/ | | |
| | MM / DD | / YYYY | | MM / DD / YYYY | | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 64 of 68

| Fill in this info | rmation to identify your ca | se: | | |
|---------------------------------|---|---------------------------|--|---|
| Debtor 1 | Elizabeth | | Martin-Hoskins | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| | | | | |
| United States f | Bankruptcy Court for the: | Northern | District of Illinois (State) | - |
| Case number | | | · | _ |
| (If known) | | | | |
| Official | Form 106Dec | 2 | | amended filing |
| | | - | | |
| Declarat | ion About an I | ndividual Deb | tor's Schedules | 12/15 |
| If two married | people are filing together | r, both are equally respo | nsible for supplying correct in | oformation. |
| Part 1: Sign | | one who is NOT an attorn | ney to help you fill out bankru | ntcy forms? |
| No | · | | io, to noip you im out buildin | soy londs. |
| Sauces | | | | |
| Yes. | Name of person | • | Attach Bankruptcy Peti Signature (Official Form | ion Preparer's Notice, Declaration, and |
| | | | -3 | · · · · · · |
| | | | | |
| | | | | |
| | | | | |
| | nalty of perjury, I declare are true and correct. | that I have read the sun | nmary and schedules filed wit | h this declaration and |
| | are true and correct. | 610 DIM 1. | // () | |
| | eth Martin-Hoskins | ole out 11 part | Mosk * | |
| Signature o | of Debtor 1 | ` | Signature of | Debtor 2 |

MM/DD/YYYY

Date 12/7/2017 MM/DD/YYYY

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 65 of 68

| Debtor 1 | Bizabeth First Name | Middle Name | Martin-Hoskins Last Name | Case number (if known) |
|----------------|------------------------------|---|---|--|
| | THIST ING | WINDOW Halle | Last ivame | مرسيس والمعربية والأراء المناف والمعارض والمراجع والمراجع والمنافع والمعارض والمعارض والمعارض والمعارض والمعارض |
| 28. Wit cre | thin 2 years ditors, or o | before you filed for bankruptcy, ther parties. | , did you give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| V | No | | | |
| Ō | Yes. Fill in | the details below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number | Street | *************************************** | |
| | City | State Zip Cod | le | |
| | | • | | |
| Part 12: | Sign Bel | OW | | |
| true a | and correct | . I understand that making a fal | se statement, concealing proper | nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 90 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | * | /s/ Elizabeth Martin-Hoskins | 6 Galiliat 17 ma | . |
| | - | Signature of Debtor 1 | | Signature of Debtor 2 |
| | | Date 12/7/2017 | | Date 12/7/2017 |
| Did yo | ou attach a | dditional pages to Your Stateme | ent of Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| ∑ N | 10 | | | |
| | 'es | | | |
| Did yo | ou pay or ag | ree to pay someone who is not | an attorney to help you fill out ba | ankruptcy forms? |
| ☑ N | lo | | | |
| | es. Name of | person | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 66 of 68

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Martin-Hoskins , Elizabeth Debtor(s) | Case No | |
|-------------------|---|--|--------------------------------|
| | | Chapter. | Chapter13 |
| | VERIFICAT | TON OF CREDITOR MATRIX | |
| The knowledge. | e above named Debtors hereby verify tha | t the attached list of creditors is true an | d correct to the best of their |
| Date: | 12/7/2017 | /s/ Martin-Hoskins , Eliz Martin-Hoskins , Elizabe Signature of Debtor | C 4, CC - CW 40 M / V 8 M |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 67 of 68

| Debt | or 1 | Bizabeth | | Martin-Hoskins | Ca | ase number (if known) | | | |
|--------|------|--|---------------------------------|------------------------|-------------------|---|--------------|--------------|--|
| | | First Name | Middle Name | Last Name | | | | | |
| 16. | Cal | Iculate the median family in | come that applies to yo | u. Follow these step | os: | | | | |
| | 168 | a. Fill in the state in which you | ı live. | Illinois | | | | | |
| | 16k | b. Fill in the number of people | in your household. | 3 | <u></u> | | | | |
| | 160 | c. Fill in the median family inco | ome for your state and size | e of | | | | \$78,559.00 | |
| | | household using the link specified in th | e separate instructions for | | | cable median income amounts, g ilable at the bankruptcy clerk's of | | | |
| 17. | Но | w do the lines compare? | | | | | | | |
| | 17a | Ta. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | | |
| | 17Ł | U.S.C. § 1325(b)(3). G | | alculation of Dispo | | cosable income is determined und (Official Form 122C-2). On line | | | |
| Part | | Calculate Your Commit | | 1 U.S.C. §1325(I | b)(4) | | | | |
| 18. | • | py your total average month | - | | | | | \$8,441.45 | |
| 19. | | | | | | h you, and you contend that calc income, copy the amount from li | | | |
| | 19a | a. If the marital adjustment doe | es not apply, fill in 0 on line | e 19a. | | | . 1 | -\$0.00 | |
| | 19b | o. Subtract line 19a from line | e 18. | | | | | \$8,441.45 | |
| 20. | Cal | culate your current monthly | y income for the year. Fo | llow these steps: | | | | | |
| | 20a | a. Copy line 19b. | | | | | | \$8,441.45 | |
| | | Multiply by 12 (the number | of months in a year). | | | | | x 12 | |
| | 20b | o. The result is your current mo | onthly income for the year | for this part of the f | orm. | | | \$101,297.40 | |
| | 20c | c. Copy the median family inco | ome for your state and size | of household from | line 16c. | | | \$78,559.00 | |
| 21. | Hov | w do the lines compare? | | | | | | | |
| | | Line 20b is less than line 20c commitment period is 3 years | | d by the court, on th | ne top of page 1 | of this form, check box 3, The | | | |
| | 図 | Line 20b is more than or equ 4, <i>The commitment period is</i> | | rwise ordered by the | e court, on the t | top of page 1 of this form, check | .box | | |
| Part 4 | | Sign Below | | | | | | | |
| | | | Day H | allo. | | nd in any attachments is true and | correct. | | |
| | | /s/ Elizabeth Martin-l | Hoskins | JHY X | · | | | | |
| | | Signature of Debtor 1 | to 16 grants | | Signature of De | ebtor 2 | | | |
| | | Date 12/7/2017 | 00 | | Date | | | | |
| | | MM/DD/YYYY | | | MM/DD | /YYYY | | | |
| | | If you checked 17a, do NOT in the state of t | | | 39 of that form, | copy your current monthly incom | ne from line | 14 | |

Case 17-36428 Doc 1 Filed 12/07/17 Entered 12/07/17 17:37:48 Desc Main Document Page 68 of 68

| Debtor 1 | Elizabeth | | Martin-Hoskins | Case number (if known) | |
|----------|------------------------------|-----------------------------|-------------------------------|---|--|
| | First Name | Middle Name | Last Name | | |
| Part 4: | Sign Below | | | | |
| By sign | ing here, under penalty of p | erjury you declare that the | information on this statement | and in any attachments is true and correct. | |
| . | | MP MY | Mala | | |
| | Elizabeth Martin-Hoskins | 600000116 | WHEN X_ | | |
| Signa | ature of Debtor 1 | 9 | Signa | tture of Debtor 2 | |
| Date | 12/7/2017 | | Date | | |
| | MM/DD/YYYY | | | MM/DD/YYYY | |
| | | | | | |
| | | | | | |